# 2.19 Release Webinar Q & A

# **ENH-264: Transfer Participants Message**

Question: When transferring between two agencies, will the new transfer message appear every time they are transferred?

Answer: A message will appear any time a participant is transferred to a different agency or satellite location. The transfer message noting that the address information must be updated will only display when a participant is transferred to a different agency. If you are transferring from one clinic to another clinic within the same agency, you will get the current message of "do you want to transfer"?

## ENH-265: Local Use Questions Required Option

Question: Will the agency be able to retrieve the response collected by the Local Use Questions?

Answer: A report can be provided. Agencies should request a report for the Local Use Question responses through the Reports Request link on the MOWINS webpage.

# ENH-267: Breastfeeding Fields on Health Information Screen

Question: If you mark the Breastfeeding Continues Beyond 1 Year checkbox on a child will you have to keep updating it?

Answer: Once the checkbox is marked users should not have to continue to update it at every certification. However, the box will stay checked until you remove it.

Question: If you mark the Breastfeeding Continues Beyond 1 Year checkbox on a child will you have to keep updating the Date Breastfeeding Verified?

Answer: Only at certification and recertification. Refer to the last page of the Q&A document for functionality of this enhancement.

Question: If you mark the Breastfeeding Continues Beyond 1 Year checkbox will the Nutritionist have to review the breastfeeding status?

Answer: It would be good for the Nutritionist to ask the question. The reason it was added was because we were losing data.

## ENH-267: Breastfeeding Fields on Health Information Screen (continued)

Question: Will there be a Crystal Report for Breastfeeding beyond 1 Year?

Answer: After discussion with the state Breastfeeding coordinator, we will not be producing a report from this data as stated in the 12/18 webinar. The reason we will not report on breastfeeding duration beyond a year of age is due to this being a very small number. The validity of the data comes into question when working with very small data sets, especially with smaller agencies. The purpose of the current BF report is to analyze trends and the effectiveness of our breastfeeding interventions. When the result is such small percentage, for many agencies being less than 1%, this data would not be useful in analyzing trends. If you have additional questions, please contact Kathy Mertzlufft directly.

Question: When marking the Breastfeeding Continues Beyond 1 Year checkbox will the Date Supplemental Feeding began still be required even if there hasn't been supplemental feeding?

Answer: The Date Supplemental Feeding Began is not required when selecting the Breastfeeding Continues Beyond 1 Year checkbox.

## **ENH-272: Copy Referrals**

Question: Is the Copy Referrals button available in both the cert guided script (CGS) and in the folder?

Answer: Yes, if the referral was completed on the current date then you will be able to use the Copy Referrals button.

Question: Will it matter if multiple participant folders in a Household are open when using the Copy Referrals button?

Answer: Our recommendation is to close other household member folders before copying referrals. However, with all the enhancements and defect fixes in the latest releases, it may not be necessary to have all folders closed.

## **ENH-291: Measurement Source**

Question: Will the growth chart indicate the measurement source after it has been entered?

Answer: The growth chart will not. However, on the Ht/Wt tab, the listing of measurements will indicate the measurement source in a column at the far right of the grid.

## ENH-291: Measurement Source (continued)

Question: Do we need to scan the referral information into MOWINS?

Answer: It is not required, but you can if you want to. However, please enter a general note in the folder that the data is from a medical referral.

## ENH-292 & ENH-328: VOC Risk Factors/Resolve High Risk Risk Factor/Risk Factor Indicator

Question: Is the Assign Risk Factors for VOC Certification only for the recording of risk factors assigned in the other state agency or is it also for risk factors assigned in our clinic?

Answer: The 502 will automatically assign when the VOC is keyed. It is up to the agency as to how you want to handle these going forward. If you have risk factors from the VOC or ones that you have identified, you have the option to key them in with this new release.

Question: Is there a difference between the asterisks (\*) and the S on the risk factor assignment window?

Answer: The asterisk indicates High Risk. The S indicates that the risk factor was system assigned.

Question: Can a WIC Certifier or a CPA select the Resolve System-assigned High Risk Designations?

Answer: No, according to policy, only the Nutritionist can resolve the High Risk. Please note that in the AM session of the December 18, 2013 webinar, it was stated that the CPA/Nutritionist/Nutrition Coordinator role would have the access to do this. That was incorrect information. The CPA/Nutritionist/Nutrition Coordinator will be split. The CPA will not have access to resolve the HR risk factors. Note: only a Nutritionist can un-resolve High Risk risk factors as well.

Question: Can the Resolve System-assigned High Risk Designations be used while in the Certification Guided Script?

Answer: Not at the initial certification. A pattern needs to be observed to verify progress is being made. Later in the certification period, after a pattern has developed and progress has been observed, the nutritionist can resolve the High Risk risk factor. During certs other than initial certifications, the nutritionist can resolve the high risk.

ENH-292 & ENH-328: VOC Risk Factors/Resolve High Risk Risk Factor/Risk Factor Indicator (continued)

Question: When the High Risk is resolved will the yellow tabs be removed?

Answer: Yes, the yellow will automatically be removed. However, the asterisk will remain by the risk factor on the risk factor tab.

Question: Can the Resolve System-assigned High Risk Designations be used if the participant has more than one high risk-risk factor?

Answer: The HR resolution checkbox will resolve ALL HR risk factors. If the participant has more than one HR RF and they have not ALL been resolved, you cannot use this new feature.

# ENH-335: Delayed Bloodwork Checkbox

Question: What should you do if a child is not due for blood work and the Delayed Blood Work is not there?

Answer: In the current production environment, you should not be using the delayed BW check box and should only be using the exception reason drop down. The exception reason drop down will also be used in the new release.

## **ENH-386: Copy Alerts to Notes**

Question: Will a note (created through the Copy Alert to Notes) stay even if the alert is deleted?

Answer: Yes, the note created will remain in the record even if the alert is deleted.

## **ENH-394: Child Food Prescriptions**

Question: When the system generates the child food package will it only add the default food prescription?

Answer: Yes, the system will only add the default food prescription.

#### ENH-396: Benefits History View

Question: Will it show you who printed benefits?

Answer: Not in the new tree view however, you will still be able to see who printed benefits by selecting an individual benefit in the tree and clicking the Show Details button.

ENH-396: Benefits History View (continued)

Question: Will the Add/Replace work the same?

Answer: Assuming you are asking about replacing the December set-It will work the same.

ENH-399 Month-to-Month

Question: Is there a fix to the February/March benefits being printed now?

Answer: The February checks that go from 2/1 to 3/2 and the March checks following that going from 3/1 to 3/31 are correct. The overlap of dates is ok because we give 30 days on the checks.

The issue with the March set going from 3/3 to 4/2 is a problem in our current release 2.18. In testing the new release 2.19, this issue should be resolved.

Question: Is there a report to show which participants are not already on M2M issuance cycle?

Answer: An excel spreadsheet will be posted on Crystal. It will be placed in the folder Local Agency<Administrative Management. It will be posted as soon as possible.

Question: Will you bring everyone in at the beginning of the month for benefits?

Answer: No, agencies will not need to bring all participants at the beginning of the month. You can leave the participants on their normal cycle. You print M2M benefits one month ahead.

Question: Will this affect the December checks only?

Answer: By pushing the release on January 6, any participants who show up late for December checks (after Jan 6) their checks will print for January. Your agency will not receive a count. This may affect February and March checks as well, depending on your participants who were not on M2M prior to the new release.

**Pending Proof & Hospital Certs** 

Question: Is Pending Proof only available for Hospital Certifications?

Answer: Yes.

Question: Will pending income proof be available in the clinic?

Answer: No.

Please reference Policy ER# 3.02000. This policy will be updated and available on the web on January 6, 2014. Quote from the revised policy: "The income proof may be delayed up to 30 days postpartum for hospital certifications for the household of a postpartum or breastfeeding woman who is still awaiting post-delivery discharge from the hospital".

Question: In the WIC clinic (not hospital cert), if they do not bring their necessary proofs (any proofs), do we have to make an appointment for them to come back in or how do we handle that?

Answer: That is up to your agency if you set up an appointment or do as a walk-in. They must return in 30 days or less. If they return within 30 days, you will need to go into the CGS, enter the proof(s) and then finish the CGS by doing the rights and responsibilities and issue benefits.

Question: Don't we have to see them in 10 days?

Answer: The new policies will be posted on the website on Monday, January 6, 2014. Make sure you read the policy as it will explain missing proofs and when to bring them back. May also discuss any policy questions you have with your TA staff.

Question: Can the HDFS screen be used as Residency Proof?

Answer: No. Policy does not and has never allowed the HDFS screen to be used as proof of residency. Please contact your TA staff if you have questions.

Question: Are you saying Adjunctive Eligibility no longer exists?

Answer: No. Income proof must be shown if they are not adjunctively eligible.

Question: What if they have already been to DFS and are in the system on the HDFS screen?

Answer: Then they are adjunctively eligible.

Question: Why does the mom not confer adjunctive eligibility?

Answer: Per policy, the only people who confer adjunctive eligibility to the household are pregnant women and infants. Non-breastfeeding and breastfeeding women do not confer adjunct eligibility and children do not confer adjunct eligibility.

Question: But infant is automatically covered under mom when it is born. Why does that not work? And can we get a blanket statement from DFS saying all infants automatically covered?

Answer: We are looking into this. Additional guidance will be given at a later date.

Question: If a participant comes in without proofs can we complete the certification and just not print benefits?

Answer: At a regular clinic (not a hospital cert), if the participant is missing any of the three (3) proofs, the agency has two (2) choices. 1) Reschedule the participant to return within 30 days with their missing proofs. 2) Collect and key all the certification data but **do not** click the stop sign to capture the R&R signature and do not print benefits. This will leave an incomplete certification in the system. The participant would need to return within 30 days with the missing proofs. At that time, the agency will key the missing information to the CGS and then click on the stop sign to capture the R&R and print the benefits.

Question: In the WIC clinic (not hospital cert), if they do not bring their necessary proofs (any proofs), do we have to make an appointment for them to come back in or how do we handle that?

Answer: That is up to your agency if you set up an appointment or do as a walk-in. They must return in 30 days or less. If they return within 30 days, you will need to go into the CGS, enter the proof(s) and then finish the CGS by doing the rights and responsibilities and issue benefits.

Question: How long will an incomplete certification stay open?

Answer: The incomplete certification will stay in the system for several months. However, if the participant is missing any proofs, they must return within 30 days. Per policy, if they do not return within 30 days, the incomplete cert must be removed and a brand new cert must be completed.

Question: Will we be able to remove incomplete certifications at any time after 24 hours?

Answer: Yes. You will be able to remove incomplete certifications at any time. After keying the CGS and leaving it as incomplete, the participant must return within 30 days with the missing proof. If they return after 30 days (ie 31+ days), you must remove incomplete certification and start a new CGS for participant and collect new data.

Question: On a hospital certification, if mom delivers in the hospital for example on the 27<sup>th</sup> of the month, and is missing income proof and is not adjunctively eligible, can we print more than one month?

Answer: No. You will only issue the benefits for the current month that end on the last day of the current month.

Question: If it is a hospital certification, can the clinic issue when she comes in if she does not have proof with her?

Answer: No. She must have proof when she comes to the clinic.

Question: When you say you can only print current month checks, is that only if the women are new to WIC and have not been on as a prenatal?

Answer: No. This is for every participant whether they are new to WIC or not.

Question: Can we give them a can of formula off the shelf if they cannot get to a clinic before the first of the next month?

Answer: No. This is considered issuance and is not allowed if missing proof due to policy.

Question: Is the pending proof policy as of today or on January 6<sup>th</sup>?

Answer: The policy went into effect on January 1<sup>st</sup>. Monitoring and TA teams will be looking to make sure pending proof policy is being followed.

Question: After the release, if doing a hospital certification and the participant is missing proof of income can we issue February checks?

Answer: If you are doing the cert in January, no, you cannot issue February checks. Going forward, the same is true. Whatever month you are in, you can only issue the current month checks and you cannot issue future month benefits.

Question: If on a Hospital Certification delayed Income Proof is okay, what about Residency Proof?

Answer: The revised policy will indicate that the hospital records may be used for residency verification.

Question: On a Hospital Certification, is a hospital chart really okay for Residency Proof?

Answer: USDA has accepted our contention that a hospital may be used as a reliable third party for verification. Insurance & MC guidelines require due-diligence of the hospitals to assure identity and other proofs for billing as well as compliance to HIPAA medical data security requirements. There are significant financial penalties to the hospitals for non-compliance. Hospitals also send bills out they want paid, so they look for verifications of residency as well. Please refer to Policy on January 6 and or contact your TA with further questions regarding policy.

Question: Can ShowMe Vax be used for a proof?

Answer: Policy does not allow ShowMe Vax as proof. Contact your TA staff if you have questions.

Question: In a clinic certification, if a mom and new infant are being certified and mom does not have proof of income for herself, does the baby get checks?

Answer: The baby would be missing the income proof as well and will not be given any checks until the proof is brought in.

Question: If a mom comes to the clinic with her new baby and she has only Medicaid adjunctive eligibility and no other income proof, and baby is not yet on Medicaid can the baby be certified and have benefits printed?

Answer: No the baby cannot get benefits. Refer to ER# 3.02000 Income Assessment and Documentation. Contact your district TA staff if you have questions.

Question: Once a participant returns with the proof who is allowed to complete the cert? Can a clerk complete it?

Answer: If all that is missing on the certification are the proof(s), then anyone can complete the cert so yes, the clerk can complete it.

Question: Our clerks at the front desk cannot do the income. The HPA does it.

Answer: That is an internal policy within your agency. The agency would need to determine who can finish the cert.

Question: On the Incomplete certification report, will the report show clerk as closing the cert if they finished the cert by entering the proof?

Answer: No, whoever started the cert will be the id shown on the report.

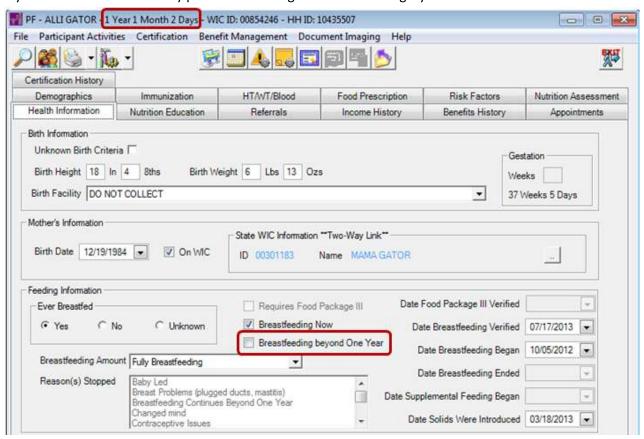
# **Nutrition Assessment**

Question: Are the new Nutrition Assessment forms to be used now or January 6?

Answer: Starting January 6<sup>th</sup>.

# **New Functionality/Enhancement**

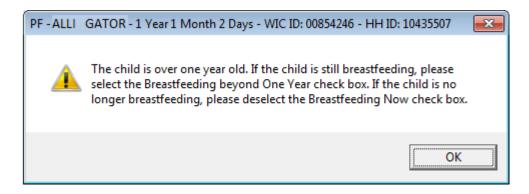
A new **Breastfeeding beyond One Year** checkbox has been added to the **Feeding Information** section on the **Child Health Information** screen. This checkbox only becomes enabled once an infant turns one-year-old and the End-of-Day process has changed their WIC Category to Child.



If the child over one-year-old is continuing to breastfeed, the user should select the **Breastfeeding beyond One Year** checkbox. The system will automatically de-select the **Breastfeeding Now** checkbox, select **Non-Breastfeeding** from the **Breastfeeding Amount** drop-down list, and disable the drop-down.



If the Health Information screen is saved for a child over one year old, and the **Breastfeeding Now** checkbox is still selected, the system will display the following message before saving the record:



For children over one who have the **Breastfeeding beyond One Year** checkbox selected, the system will no longer verify the **Date Breastfeeding Verified** field at benefit issuance; it will only verify the date has been updated at certifications.

If the child is no longer breastfeeding at their next certification, the checkmark should be removed from the **Breastfeeding Beyond One Year** checkbox. The system will require the user to enter the **Date Breastfeeding Ended** before saving the change since this will be used for calculation of breastfeeding duration.



**NOTE!** The **Date Breastfeeding Verified, Breastfeeding beyond One Year** checkbox, and **Date Breastfeeding Ended** can be updated at any time during the certification period. The system will REQUIRE an update at certification.